

Berrien County Sheriff's Office 500 County Farm Road Nashville,Geogia 31639

CRIMINAL HISTORY CONSENT FORM

- U.S.					
Full Name					
(Please Print)					
Aliases (Maiden)					
Social Security #					
Driver's License #	DOB	Ra		Sex	
Street Address					
City	State		Zip		
Purpose Codes	[] E (General Background Check**) [] M (Employment w/ Mentally Disabled** [] N (Employment w/ Elder Care **[] W (Employment w/ Children**) **provides Georgia records only [] P (Public Records) **provides Georgia Felony Convictions only**				
	[] J (Civilian Employment w/ Criminal Justice Agency) **provides completed GA & III records except juvenile or restricted** [] Z (P.O.S.T. Certified Employment w/ Criminal Justice Agency) **provides GA & III records including restricted that contain completed first offender sentences for any offense**				
CRIMINAL HISTORY REQUEST I hereby request and authorize the Berrien County Sheriff's Department to receive a criminal history pertaining to me, from the files of the Georgia Criminal Information Center (GCIC) & National Criminal Information Center (NCIC). This history should reflect any reportable offenses from all					
local and state criminal justice agencies in Georgia and/or the U.S.A. as per the applicable Purpose Code.					
[] This authorization is valid for 30 days from date of signature . [] I,					
company/agency) to perform periodic criminal history background checks for the duration of my employment with this company.					
Signature		Date			
Notary (If not signed in presence of BCSO		Date			
personnel)		Expiration [Date		
ATTENTION					
DO NOT WRITE BELOW THIS LINE SHERIFF"S DEPARTMENT USE ONLY					
A check of criminal history files was conducted and revealed that The above named individual has no record The attached record of pages. The above named also has NO NCIC/GCIC Warrant results The above named HAS Possible NCIC/GCIC Warrant. Contact agency: at					
Search Conducted By (Signature)		Dat	te		